



Missouri Ethics Commission
COMMITTEE DISCLOSURE REPORT COVER PAGE

M.E.C. ID NO. C180680

1. DATE OF REPORT 3/25/2019	OFFICE USE ONLY
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INSTRUCTIONS ON REVERSE SIDE

2. FULL NAME OF COMMITTEE Friends Of Chris Kelly	
3. COMMITTEE MAILING ADDRESS 1400 Forum Blvd Suite 7A #346 CITY / STATE / ZIP Columbia MO 65203	4. COMMITTEE TELEPHONE NUMBER (573) 489-0684
5. TREASURER'S NAME Nikki Krawitz	
6. TREASURER'S MAILING ADDRESS 901 Edgewood Ave CITY / STATE / ZIP Columbia MO 65203	7. TREASURER'S TELEPHONE NUMBER HOME: (573) 874-3917 WORK:
8. DEPUTY TREASURER'S NAME <input type="checkbox"/> CHECK IF NO DEPUTY TREASURER Vicki Hobbs	
9. DEPUTY TREASURER'S MAILING ADDRESS 4001 Coats Lane Columbia MO 65203 CITY / STATE / ZIP	10. DEPUTY TREASURER'S TELEPHONE NUMBER HOME: (573) 445-4940 WORK:
11. DATE OF ELECTION 4/2/2019	12. TYPE OF ELECTION (CHECK ONE) <input type="radio"/> PRIMARY <input checked="" type="radio"/> GENERAL <input type="radio"/> SPECIAL
13. TIME PERIOD COVERED BY THIS STATEMENT FROM 2/17/2019 THROUGH 3/21/2019	
14. CANDIDATE COMMITTEES ONLY: LIST CANDIDATE'S NAME, ADDRESS, PHONE, OFFICE SOUGHT, POLITICAL SUBDIVISION AND POLITICAL PARTY Chris Kelly 2706 Bristol Lake Columbia MO 65201 (573) 489-0684 Mayor City of Columbia <input type="checkbox"/> CHECK IF INCUMBENT <input type="checkbox"/> REPUBLICAN <input type="checkbox"/> DEMOCRAT <input checked="" type="checkbox"/> Non-Partisan	15. TYPE OF REPORT <input type="checkbox"/> 15 DAYS AFTER CAUCUS NOMINATION <input type="checkbox"/> COMMITTEE QUARTERLY REPORT <input type="checkbox"/> Jan 15 <input type="checkbox"/> Apr 15 <input type="checkbox"/> Jul 15 <input type="checkbox"/> Oct 15 <input checked="" type="checkbox"/> 8 DAYS BEFORE <input type="checkbox"/> 30 DAYS AFTER ELECTION <input type="checkbox"/> TERMINATION (ATTACH FORM CO-3) <input type="checkbox"/> SEMIANNUAL DEBT REPORT <input type="checkbox"/> Jan 15 <input type="checkbox"/> Jul 15 <input type="checkbox"/> ANNUAL SUPPLEMENTAL, JAN 15 <input type="checkbox"/> 15 DAYS AFTER PETITION DEADLINE <input type="checkbox"/> OTHER <input type="checkbox"/> AMENDING PREVIOUS REPORT DATED _____, 20____
16. COMMITTEE TREASURER'S SIGNATURE I CERTIFY THAT THIS REPORT, COMPRISED OF THIS COVER PAGE AND ALL ATTACHED FORMS, IS COMPLETE, TRUE AND ACCURATE. ELECTRONICALLY FILED Mar 25 2019 3:59PM _____ TREASURER'S SIGNATURE	17. CANDIDATE'S SIGNATURE (CANDIDATE COMMITTEES ONLY) I CERTIFY THAT THIS REPORT, COMPRISED OF THIS COVER PAGE AND ALL ATTACHED FORMS, IS COMPLETE, TRUE AND ACCURATE. ELECTRONICALLY FILED Mar 25 2019 3:59PM _____ CANDIDATE'S SIGNATURE



Missouri Ethics Commission

REPORT SUMMARY

Instructions on Reverse Side

Name of Committee	Date of Report	Office Use Only
Friends Of Chris Kelly	3/25/2019	

Receipts		A. This Period	B. This Calendar Yr or Election Cycle	Statement of Beginning and Ending Financial Condition	
1. Total Receipts For This Election Previously Reported			\$ 19,060.00		
2. All Monetary Contributions Received This Period		\$ 33,619.00			
3. All Loans Received This Period		+ 0.00			
4. Miscellaneous Receipts This Period		+ 0.00			
5. Subtotal Monetary Receipts This Period (Sum 2A + 3A + 4A)		\$ 33,619.00			
6. In-kind Contributions Received This Period		+ 137.31			
7. Total All Receipts This Period (Sum 5A + 6A)		\$ 33,756.31			
8. Total All Receipts This Election (Sum 1B + 7A)			\$ 52,816.31		
Expenditures		A. This Period	B. This Calendar Yr or Election Cycle		
9. Total Expenditures for this election previously reported			\$ 7,119.53		
10. Expenditures made by cash or check this period		\$ 11,903.17			
11. In-Kind Expenditures made this period		+ 0.00			
12. Expenditures incurred this period (not including loans) including payments made by credit card (line 17 CD3)		+ 0.00			
13. Total All expenditures made this period (Sum 10A + 11A + 12A) Including payments made by Credit Card (line 17 CD3)		\$ 11,903.17			
14. Total Expenditures This Election (Sum 9B + 13A)			\$ 19,022.70		
Contributions Made		A. This Period	B. This Calendar Yr or Election Cycle		
15. Total Contributions Made For This Election Previously Reported			\$ 175.00		
16. All Contributions Made This Period (25A or 25B of CD3)		A 0.00	← Cash/Check		
		B 0.00	← Credit Card		
17. All In-Kind Contributions Made This Period		+ 0.00			
18. Total Contributions Made This Period (Sum 16A + 17A)		\$ 0.00			
19. Total All Contributions Made This Election (Sum 15B + 18A)			\$ 175.00		
Other Disbursements		A. This Period	B. This Calendar Yr or Election Cycle		
20. Funds Used For Paying Loans This Period Including Credit Card Payments		+ 0.00			
21. Payments This Period on Prev Reported Expend Incurred (Paid by Cash/Check Only)		+ 0.00			
22. Any Miscellaneous Disbursement Not Reported Elsewhere		+ 0.00			
23. Total Other Disbursements This Period (Sum 20A + 21A + 22A)		\$ 0.00			
				24. Money On Hand at the beginning of this reporting period (Including funds in depository, cash, savings accounts and all other investments)	\$ 11,380.47
				25. Monetary Receipts this Period (From Item 5 - this page)	+ 33,619.00
				26. Monetary Disbursements Made This Period (Sum 10 + 16A + 23) a) Disbursements By Check \$ 11,903.17 b) Disbursements By Cash \$ 0.00	- 11,903.17
				27. Money On Hand at the close of this reporting period (SUM 24 + 25 - 26)	\$ 33,096.30
				Indebtedness	
				28. Outstanding Indebtedness at the beginning of this period	\$ 0.00
				29. Loans Received This Period	+ 0.00
				30. A. New Expenditures Incurred This Period (include payments by Credit Card (Line 17 CD3)	+ 0.00
				B. New Contributions Made by Credit Card (Line 25B CD3)	+ 0.00
				31. Payments Made on Loans This Period	- 0.00
				32. Debt Forgiven on Loans This Period	- 0.00
				33. Payments Made This Period on Expenditures Incurred in Previous Period (Paid by Cash/Check Only) (Line 21 this page)	- 0.00
				34. Total Indebtedness at the Close of This Reporting Period (Sum 28 + 29 + 30A + 30B - 31 - 32 - 33)	\$ 0.00



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS AND LOANS RECEIVED
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE Friends Of Chris Kelly		2. REPORT DATE 3/25/2019	
A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.		4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)			
NAME:			
ADDRESS:			\$
CITY / STATE:			
EMPLOYER:			<input type="checkbox"/> MONETARY
<input type="checkbox"/> COMMITTEE:		\$	<input type="checkbox"/> IN-KIND
NAME:			
ADDRESS:			\$
CITY / STATE:			
EMPLOYER:			<input type="checkbox"/> MONETARY
<input type="checkbox"/> COMMITTEE:		\$	<input type="checkbox"/> IN-KIND
NAME:			
ADDRESS:			\$
CITY / STATE:			
EMPLOYER:			<input type="checkbox"/> MONETARY
<input type="checkbox"/> COMMITTEE:		\$	<input type="checkbox"/> IN-KIND
NAME:			
ADDRESS:			\$
CITY / STATE:			
EMPLOYER:			<input type="checkbox"/> MONETARY
<input type="checkbox"/> COMMITTEE:		\$	<input type="checkbox"/> IN-KIND
NAME:			
ADDRESS:			\$
CITY / STATE:			
EMPLOYER:			<input type="checkbox"/> MONETARY
<input type="checkbox"/> COMMITTEE:		\$	<input type="checkbox"/> IN-KIND
6. SUBTOTAL: ITEMIZED CONTRIBUTIONS THIS PAGE (SUM COLUMN 5)		\$ 0.00	
7. SUBTOTAL: ITEMIZED CONTRIBUTIONS ANY ATTACHED PAGES		+ \$ 33,731.31	
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)		\$ 33,731.31	
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS MONETARY CONTRIBUTIONS		\$ 33,619.00	
10. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS IN-KIND CONTRIBUTIONS		\$ 112.31	
B. NON-ITEMIZED CONTRIBUTIONS RECEIVED (LIST BY CATEGORY, NOT BY INDIVIDUAL CONTRIBUTIONS)		AMOUNT RECEIVED	
11. TOTAL CONTRIBUTIONS RECEIVED AT FUND-RAISERS AS REPORTED INLINE 8 ON FORM CD1A		\$ 0.00	
12. TOTAL ANONYMOUS CONTRIBUTIONS RECEIVED FROM PERSON GIVING \$25 OR LESS		\$ 0.00	
13. TOTAL MONETARY CONTRIBUTIONS RECEIVED FROM PERSONS GIVING \$100 OR LESS		\$ 0.00	
14. TOTAL IN-KIND CONTRIBUTIONS RECEIVED FROM PERSONS (NOT COMMITTEES) GIVING \$100 OR LESS		\$ 25.00	
C. LOANS RECEIVED			
15. NAME AND ADDRESS OF LENDER		16. DATE RECEIVED	17. AMOUNT OF LOAN (IF MORE THAN \$100 ATTACH CD-1B)
NAME:			
ADDRESS:			
CITY / STATE:			\$
NAME:			
ADDRESS:			
CITY / STATE:			\$
18. SUBTOTAL: LOANS THIS PAGE (SUM COLUMN 17)		\$ 0.00	
19. SUBTOTAL: LOANS FROM ANY ATTACHED PAGES		\$ 0.00	
20. TOTAL: LOANS THIS PERIOD (SUM 18 + 19)		\$ 0.00	
21. TOTAL: ALL IN-KIND CONTRIBUTIONS (SUM 10 + 14)		\$ 137.31	
22. TOTAL: ALL MONETARY CONTRIBUTIONS (SUM 9, 11, 12 & 13)		\$ 33,619.00	
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)		\$ 33,619.00	



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE Friends Of Chris Kelly	DATE 3/25/2019
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INSTRUCTIONS

PURPOSE: The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

If further information is needed concerning reporting itemized expenditures, see Form CD-1 Instructions.

A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE. 3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
NAME: ADDRESS: Suzette Waters CITY / STATE: 300 Lindell Dr Columbia MO 65203 EMPLOYER: Todd Scott DDS -- Dental Hygienist <input type="checkbox"/> COMMITTEE:	2/18/2019 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jerry Kennett CITY / STATE: 4614 Copperstone Ct Columbia MO 65203 EMPLOYER: Self-employed -- Physician <input type="checkbox"/> COMMITTEE:	2/18/2019 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jim & Phyllis Hardin CITY / STATE: 2312 Winchester Dr Columbia MO 65202 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/18/2019 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John Cleek Jr CITY / STATE: 4004 Southern Pine Ct Columbia MO 65203 EMPLOYER: Self-employed -- Sales <input type="checkbox"/> COMMITTEE:	2/18/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Janet Thompson CITY / STATE: 8300 N Wagon Trail Rd Columbia MO 65202 EMPLOYER: Boone County -- Presiding Com <input type="checkbox"/> COMMITTEE:	2/18/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: William Beckett CITY / STATE: 706 Thilly Ave Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/19/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John John CITY / STATE: 1001 Lagrange Ct Columbia MO 65203 EMPLOYER: Self-employed -- Realtor <input type="checkbox"/> COMMITTEE:	2/20/2019 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jacqueline Jones CITY / STATE: 27 E Thurman Columbia MO 65202 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/21/2019 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE Friends Of Chris Kelly	DATE 3/25/2019
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INSTRUCTIONS

PURPOSE: The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE. 3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
NAME: ADDRESS: Kee Groshong CITY / STATE: 201 W Blvd S Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/21/2019 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Steelman CITY / STATE: PO Box 1257 Rolla MO 65402 EMPLOYER: Univ of MO -- Board of Curators <input type="checkbox"/> COMMITTEE:	2/21/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jamie Varvaro CITY / STATE: 105 Thistlelawn Dr Columbia MO 65203 EMPLOYER: Thumper Entertainment -- Dir Mkting & Dev <input type="checkbox"/> COMMITTEE:	2/22/2019 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Vic Arnold CITY / STATE: 2405 Stratford Chase Pkwy Columbia MO 65201 EMPLOYER: Univ of MO -- Assoc Dean of Finance Sch of Med <input type="checkbox"/> COMMITTEE:	2/23/2019 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Susan Jenkins CITY / STATE: 3000 S Rodeo Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/23/2019 ----- \$ 125.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Wendy Hoffman CITY / STATE: 102 Longfellow Ln Columbia MO 65203 EMPLOYER: Not employed <input type="checkbox"/> COMMITTEE:	2/23/2019 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Chris & Janet Kelly CITY / STATE: 2735 Shag Bark Ct Columbia MO 65203 EMPLOYER: Univ of MO -- Advancement Director <input type="checkbox"/> COMMITTEE:	2/23/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tom Schneider CITY / STATE: 917 Lagrange Rd Columbia MO 65203 EMPLOYER: Self-employed -- Attorney <input type="checkbox"/> COMMITTEE:	2/23/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE Friends Of Chris Kelly	DATE 3/25/2019
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INSTRUCTIONS

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Jim Thornburg CITY / STATE: 1111 S Graystone Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/24/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bette Weiss CITY / STATE: 4300 E Richland Rd Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/23/2019 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ed & Mary Ann Scott CITY / STATE: 7900 N Rte J Rocheport MO 65279 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/25/2019 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Gary & Donna Hennigh CITY / STATE: 1816 Oakcliff Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/25/2019 ----- \$ 40.00	\$ 40.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bill Moyes CITY / STATE: 4209 Fritz Ct Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/25/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jeri Doty CITY / STATE: 1013 Marcassin Dr Columbia MO 65201 EMPLOYER: MU Health Care -- Healthcare Administrator <input type="checkbox"/> COMMITTEE:	2/25/2019 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Donald Kinser CITY / STATE: 1263 Colony Dr Marietta GA 30068 EMPLOYER: Valley View Mgmt -- Engineer <input type="checkbox"/> COMMITTEE:	2/26/2019 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Glen Ehrhardt CITY / STATE: 2906 Shoreside Dr Columbia MO 65203 EMPLOYER: Rogers Ehrhardt Law -- Attorney <input type="checkbox"/> COMMITTEE:	2/26/2019 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE Friends Of Chris Kelly	DATE 3/25/2019
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INSTRUCTIONS

PURPOSE: The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Bill & Susan Elder CITY / STATE: 2018 S Deerborn Cir Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/26/2019 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Aaron Smith CITY / STATE: 2100 W Broadway Columbia MO 65203 EMPLOYER: AW Smith Law Firm -- Attorney <input type="checkbox"/> COMMITTEE:	2/26/2019 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Roger Gafke CITY / STATE: 325 E Dripping Springs Rd Columbia MO 65202 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/26/2019 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sarah Giboney CITY / STATE: 290 Sequoia Cir Ashland MO 65010 EMPLOYER: Smith Lewis LLP -- Attorney <input type="checkbox"/> COMMITTEE:	2/27/2019 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tom McSherry CITY / STATE: 1600 Johnmeyer Ln Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/27/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ted Groshong CITY / STATE: 2600 Limerick Ln Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/27/2019 ----- \$ 75.00	\$ 75.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Linda Atkins CITY / STATE: 3030 Arrowhead Lake Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/28/2019 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Truman Allen CITY / STATE: 2900 Butterfield Ct Columbia MO 65203 EMPLOYER: Self-employed -- Attorney <input type="checkbox"/> COMMITTEE:	2/28/2019 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE Friends Of Chris Kelly	DATE 3/25/2019
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INSTRUCTIONS

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Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

If further information is needed concerning reporting itemized expenditures, see Form CD-1 Instructions.

A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE. 3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
NAME: ADDRESS: Tom Atkins CITY / STATE: 1123 Wilkes Blvd Columbia MO 65201 EMPLOYER: Self-employed -- Investments <input type="checkbox"/> COMMITTEE:	2/28/2019 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Fran Atkins CITY / STATE: 3909 Daylily Ct Columbia MO 65203 EMPLOYER: Columbia Public Schools -- Teacher <input type="checkbox"/> COMMITTEE:	2/28/2019 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: T Scott Atkins CITY / STATE: 3909 Daylily Ct Columbia MO 65203 EMPLOYER: Atkins Inc -- Investments <input type="checkbox"/> COMMITTEE:	2/28/2019 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Hardeep Bhullar CITY / STATE: PO Box 263 Columbia MO 65205 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/28/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Carl & Kathie Esbeck CITY / STATE: 3264 S Country Woods Rd Columbia MO 65203 EMPLOYER: Univ of MO -- Professor <input type="checkbox"/> COMMITTEE:	2/28/2019 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Charles Dykhouse CITY / STATE: PO Box 145 Columbia MO 65205 EMPLOYER: County of Boone -- Attorney <input type="checkbox"/> COMMITTEE:	3/1/2019 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Paul & Frankye Mehrle CITY / STATE: 1804 West Broadway Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/1/2019 ----- \$ 350.00	\$ 350.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dan Viets CITY / STATE: 15 N 10th St Columbia MO 65201 EMPLOYER: Self-employed -- Attorney <input type="checkbox"/> COMMITTEE:	3/3/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE Friends Of Chris Kelly	DATE 3/25/2019
---	-------------------

INSTRUCTIONS

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Jack & Claudia Jensen CITY / STATE: 2504 Basswood Ct Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/4/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ellen Horwitz CITY / STATE: 2608 Vistaview Ter Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/4/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Darcy Wells CITY / STATE: 504 W Lathrop Rd Columbia MO 65203 EMPLOYER: Univ of MO -- Admin/Fundraiser <input type="checkbox"/> COMMITTEE:	3/4/2019 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Phil & Denice Warnken CITY / STATE: 2509 Vistaview Ter Columbia MO 65203 EMPLOYER: Self-employed -- Property Mgr <input type="checkbox"/> COMMITTEE:	3/4/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Richard Diamant CITY / STATE: 216 W Alhambra Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/5/2019 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Linda Kanagawa CITY / STATE: 3301 Kunlun Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/6/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Robert & Barbara Churchill CITY / STATE: 1119 Northshore Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/6/2019 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John & Ann Cleek CITY / STATE: 401 W Blvd N Columbia MO 65293 EMPLOYER: Self-employed -- Sales <input type="checkbox"/> COMMITTEE:	3/6/2019 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE Friends Of Chris Kelly	DATE 3/25/2019
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NAME: ADDRESS: Robert & Holly Heidlage CITY / STATE: 7510 S Hillside Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/6/2019 \$ 15.00	\$ 15.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ken & Charlotte Dean CITY / STATE: 1906 S Fairview Rd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/6/2019 \$ 300.00	\$ 300.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Henry & Shirley Fisher CITY / STATE: 13285 N Hwy YY Harrisburg MO 65256 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/6/2019 \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ken Wilhelm & Nancy Gerardi CITY / STATE: 2408 Waterside Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/6/2019 \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Chester Edwards CITY / STATE: 1215 E Nifong Blvd Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/7/2019 \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David & Lee Russell CITY / STATE: 3456 Woodrail Ter Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/7/2019 \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Melissa Petty CITY / STATE: 3400 Winners Cir Columbia MO 65202 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/7/2019 \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bill & Doyne McKenzie CITY / STATE: 710 Thilly Ave Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/7/2019 \$ 250.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE Friends Of Chris Kelly	DATE 3/25/2019
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NAME: ADDRESS: Jeff & Sandy Belden CITY / STATE: 309 Arbor Dr Columbia MO 65201 EMPLOYER: Univ of MO -- Physician <input type="checkbox"/> COMMITTEE:	3/7/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Andy & Suzette Waters CITY / STATE: 300 Lindell Dr Columbia MO 65203 EMPLOYER: Self-employe -- Real estate owner <input type="checkbox"/> COMMITTEE:	3/7/2019 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John Wright CITY / STATE: 401 Locust St Columbia MO 65201 EMPLOYER: Self-employed -- Investor <input type="checkbox"/> COMMITTEE:	3/7/2019 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sheri Radman CITY / STATE: 404 Silver Thorne Dr Columbia MO 65203 EMPLOYER: Re/Max Boone Realty -- Realtor <input type="checkbox"/> COMMITTEE:	3/7/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Stockard CITY / STATE: 4202 Cottonwood Dr Columbia MO 65202 EMPLOYER: The Compass Team -- Realtor <input type="checkbox"/> COMMITTEE:	3/8/2019 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Denny Douglas CITY / STATE: 1400 Forum Blvd Columbia MO 65203 EMPLOYER: Plaza Real Estate -- Realtor <input type="checkbox"/> COMMITTEE:	3/8/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Alex Burnam CITY / STATE: 1602 Gypsy Moth Dr Columbia MO 65202 EMPLOYER: StorageMart -- Real Estate <input type="checkbox"/> COMMITTEE:	3/8/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Lindell Thurman CITY / STATE: 1700 Forum #3102 Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/8/2019 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE Friends Of Chris Kelly	DATE 3/25/2019
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NAME: ADDRESS: Shannon Sapp CITY / STATE: 5601 North Rt E EMPLOYER: Columbia MO 65202 Self-employe -- Builder <input type="checkbox"/> COMMITTEE:	3/11/2019 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John Ott CITY / STATE: 212 Bingham Rd EMPLOYER: Columbia MO 65203 Alley A Realty -- Business owner <input type="checkbox"/> COMMITTEE:	3/11/2019 ----- \$ 500.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Michelle Cecil CITY / STATE: 1700 Cliff Pl EMPLOYER: Columbia MO 65203 Univ of MO -- Law School Teaching Professor <input type="checkbox"/> COMMITTEE:	3/11/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Patrick & Mary Del Eng CITY / STATE: 1032 Queen Ann Dr EMPLOYER: Columbia MO 65201 Eng & Woods -- Attorney <input type="checkbox"/> COMMITTEE:	3/11/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Timothy Burnam CITY / STATE: 215 N Stadium Blvd EMPLOYER: Columbia MO 65203 StorageMart Partners -- Sr Vice-President <input type="checkbox"/> COMMITTEE:	3/11/2019 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mike Burnam CITY / STATE: 215 Stadium Blvd EMPLOYER: Columbia MO 65203 StorageMart Partners -- CEO <input type="checkbox"/> COMMITTEE:	3/11/2019 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Chris Burnam CITY / STATE: PO Box U EMPLOYER: Columbia MO 65205 StorageMart Partners -- President <input type="checkbox"/> COMMITTEE:	3/11/2019 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Alex Radman CITY / STATE: 33 E Broadway EMPLOYER: Columbia MO 65203 Re/Max -- Realtor <input type="checkbox"/> COMMITTEE:	3/11/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

--

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE Friends Of Chris Kelly	DATE 3/25/2019
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INSTRUCTIONS

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NAME: ADDRESS: Frances A Moore CITY / STATE: 505 Spring Valley Columbia MO 65203 EMPLOYER: D&M Sound -- Sales <input type="checkbox"/> COMMITTEE:	3/11/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Phil & Brenda Hanson CITY / STATE: 801 Canterbury Columbia MO 65203 EMPLOYER: Hanson & Co -- CPA <input type="checkbox"/> COMMITTEE:	3/11/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Carroll Highbarger CITY / STATE: 3100 Rodeo Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/11/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Albert & Marjo Price CITY / STATE: 107 Bingham Rd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/11/2019 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ann Gowans CITY / STATE: 701 Redbud Ln Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/11/2019 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Linda Duffy CITY / STATE: 3448 Woodrail Ter Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/11/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Richard & Cynthia Malon CITY / STATE: 3801 Ivanhoe Blvd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/11/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bo & Terry Fraser CITY / STATE: 1601 Stonehaven Rd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/11/2019 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE Friends Of Chris Kelly	DATE 3/25/2019
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NAME: ADDRESS: Greg Flaker CITY / STATE: 7501 Cave Creek Rd Columbia MO 65203 EMPLOYER: Univ of MO -- Physician <input type="checkbox"/> COMMITTEE:	3/11/2019 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ken & Wendy Kvam CITY / STATE: 2604 Luan Ct Columbia MO 65203 EMPLOYER: Self-employed -- Landscape Contractor <input type="checkbox"/> COMMITTEE:	3/11/2019 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Brian & Jennifer Toohey CITY / STATE: 3306 Snow Leopard Dr Columbia MO 65202 EMPLOYER: CEO -- Columbia Board of Realtors <input type="checkbox"/> COMMITTEE:	3/12/2019 ----- \$ 300.00	\$ 300.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bob Pugh CITY / STATE: 1411 Torrey Pines Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/12/2019 ----- \$ 2,000.00	\$ 2,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Lein Shory CITY / STATE: 502 Parkwood Ct Columbia MO 65203 EMPLOYER: Univ of MO -- Program Coord <input type="checkbox"/> COMMITTEE:	3/13/2019 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ed & Dawn Orr CITY / STATE: 28 N 8th St Columbia MO 65201 EMPLOYER: Self-employed -- Attorney <input type="checkbox"/> COMMITTEE:	3/13/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Greg Steinhoff CITY / STATE: 5708 S Sundance Dr Columbia MO 65203 EMPLOYER: Veterans United -- Executive <input type="checkbox"/> COMMITTEE:	3/13/2019 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bill & Doyne McKenzie CITY / STATE: 710 Thilly Ave Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/13/2019 ----- \$ 400.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE Friends Of Chris Kelly	DATE 3/25/2019
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NAME: ADDRESS: Michelle Curry CITY / STATE: 3609 Ironwood Dr Columbia MO 65203 EMPLOYER: Commerce Bank -- Treas Mgmt Officer <input type="checkbox"/> COMMITTEE:	3/13/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Michelle Curry CITY / STATE: 3609 Ironwood Dr Columbia MO 65203 EMPLOYER: Commerce Bank -- Treas Mgmt Officer <input type="checkbox"/> COMMITTEE:	3/13/2019 ----- \$ 112.31	\$ 112.31 <input type="checkbox"/> MONETARY <input checked="" type="checkbox"/> IN-KIND
NAME: ADDRESS: Ross Smith CITY / STATE: 806 Ridgeway Ave Columbia MO 65203 EMPLOYER: MO Credit Union -- Finance <input type="checkbox"/> COMMITTEE:	3/15/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jim Little CITY / STATE: 605 Seymour Rd Columbia MO 65203 EMPLOYER: Ameren -- Nuclear Engineer <input type="checkbox"/> COMMITTEE:	3/13/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dee Dee Strnad CITY / STATE: 803 Cornell Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/15/2019 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Katharine Hunvald CITY / STATE: 501 West Blvd S Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/15/2019 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Van & Caryl Darkow CITY / STATE: 3906 Frontenac Pl Columbia MO 65203 EMPLOYER: Boyce & Bynum -- Pathologist <input type="checkbox"/> COMMITTEE:	3/15/2019 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Nancy Griggs CITY / STATE: 6420 N Hwy V V Columbia MO 65202 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/15/2019 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

--

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE Friends Of Chris Kelly	DATE 3/25/2019
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NAME: ADDRESS: Gerald & Naomi Cupp CITY / STATE: 1015 Marcassin Dr Columbia MO 65201 EMPLOYER: MO Board of Healing Arts -- Physician <input type="checkbox"/> COMMITTEE:	3/15/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Keller CITY / STATE: 1709 Stirling Ct Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/15/2019 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Katherine Kelly Bravo CITY / STATE: 1554 W Mulberry Ave San Antonio TX 78201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/15/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jerry Murrell CITY / STATE: 1400 Torrey Pines Dr Columbia MO 65203 EMPLOYER: Retired -- Physician <input type="checkbox"/> COMMITTEE:	3/15/2019 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Connie Hendren CITY / STATE: 10950 W Bradley Ln Rocheport MO 65279 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/15/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Stephen Gunn CITY / STATE: 2715 Burrwood Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/15/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Parmley CITY / STATE: #5 McBride & Son Center Chesterfield MO 63005 EMPLOYER: Chesterfield Hotels -- Hotel Mgmt <input type="checkbox"/> COMMITTEE:	3/15/2019 ----- \$ 260.00	\$ 260.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jim & Connie Loveless CITY / STATE: 2404 Topaz Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/16/2019 ----- \$ 99.00	\$ 99.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

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Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Gerald Hazelbauer CITY / STATE: 200 Bingham Rd Columbia MO 65203 EMPLOYER: Retired -- Univ Professor <input type="checkbox"/> COMMITTEE:	3/16/2019 ----- \$ 1,000.00	\$ 1,000.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Robert Christensen CITY / STATE: 4107 Baurichter Columbia MO 65203 EMPLOYER: Christensen Construction -- Manager <input type="checkbox"/> COMMITTEE:	3/16/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Rosemary Christensen CITY / STATE: 4107 Baurichter Columbia MO 65203 EMPLOYER: Christensen Construction -- Office worker <input type="checkbox"/> COMMITTEE:	3/16/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Robert Obermeier CITY / STATE: 16432 Farmers Mill Ln Chesterfield MO 63005 EMPLOYER: F&B Financial Group -- Mortgage Banker <input type="checkbox"/> COMMITTEE:	3/16/2019 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dan Viets CITY / STATE: 15 N 10th St Columbia MO 65201 EMPLOYER: Self-employed -- Attorney <input type="checkbox"/> COMMITTEE:	3/17/2019 ----- \$ 200.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Richard Mendenhall CITY / STATE: 2212 Shepard Blvd Columbia MO 65201 EMPLOYER: ReMax Boone Realty -- Real Estate <input type="checkbox"/> COMMITTEE:	3/17/2019 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Brandon Kewley CITY / STATE: 902 W Texas Ave Columbia MO 65202 EMPLOYER: Mugs Up Drive In -- Manager <input type="checkbox"/> COMMITTEE:	3/18/2019 ----- \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Lori Neidel CITY / STATE: 2911 Oaklawn Columbia MO 65203 EMPLOYER: Law Office of Lori Neidel -- Attorney <input type="checkbox"/> COMMITTEE:	3/18/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE Friends Of Chris Kelly	DATE 3/25/2019
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INSTRUCTIONS

PURPOSE: The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

If further information is needed concerning reporting itemized expenditures, see Form CD-1 Instructions.

A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE. 3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
NAME: ADDRESS: William Parks CITY / STATE: 2501 Limerick Ln Columbia MO 65203 EMPLOYER: Retired -- Physician <input type="checkbox"/> COMMITTEE:	3/18/2019 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: E Lynn & Jacqueline Miller CITY / STATE: 8204 Happy Hollow Rd Columbia MO 65203 EMPLOYER: Retired -- Dentist <input type="checkbox"/> COMMITTEE:	3/18/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jim & Sandy Ollar CITY / STATE: 1251 W Covered Bridge Rd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/18/2019 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Michael & Claudia Kehoe CITY / STATE: 3589 Gettysburg Pl Columbia MO 65109 EMPLOYER: State of MO -- Lt Governor <input type="checkbox"/> COMMITTEE:	3/18/2019 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Rusty & Melissa Strodtman CITY / STATE: 4009 Quinton Ct Columbia MO 65202 EMPLOYER: Columbia Mall -- Gen Mgr <input type="checkbox"/> COMMITTEE:	3/18/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ben Faber CITY / STATE: 3710 Watts Dr Columbia MO 65203 EMPLOYER: Self-employed -- Attorney <input type="checkbox"/> COMMITTEE:	3/18/2019 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Steve & Laura Erdel CITY / STATE: 2605 Vistaview Ter Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/19/2019 ----- \$ 500.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Michael & Anne Moore CITY / STATE: 505 Spring Valley Rd Columbia MO 65203 EMPLOYER: D&M Sound -- Sales <input type="checkbox"/> COMMITTEE:	3/19/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE Friends Of Chris Kelly	DATE 3/25/2019
---	-------------------

INSTRUCTIONS

PURPOSE: The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

If further information is needed concerning reporting itemized expenditures, see Form CD-1 Instructions.

A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Darwin Hindman CITY / STATE: 1223 Frances Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/19/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Charles & Carolyn Allen CITY / STATE: 2601 Limerick Ln Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/19/2019 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bill Bondeson CITY / STATE: 913 Leland Ridge Rd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/20/2019 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ali Price CITY / STATE: 111 E Brandon Rd Columbia MO 65203 EMPLOYER: Mayer Flanagan Scott & Assoc -- Clinical Psychologist <input type="checkbox"/> COMMITTEE:	3/20/2019 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Cheryl Kelly CITY / STATE: 3735 Old Ridge Ct Columbia MO 65203 EMPLOYER: State Farm Insurance -- Agent <input type="checkbox"/> COMMITTEE:	3/20/2019 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Louise Martin CITY / STATE: 37 Broadway Village Dr Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/20/2019 ----- \$ 125.00	\$ 125.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Steve Scott CITY / STATE: 201 Westwood Ave Columbia MO 65203 EMPLOYER: Scott Law Firm PC -- Attorney <input type="checkbox"/> COMMITTEE:	3/21/2019 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
EXPENDITURES AND CONTRIBUTIONS MADE
 Instructions on Reverse Side

Office Use Only

1. Name of Committee Friends Of Chris Kelly		2. Report Date 3/25/2019	
A. Expenditures of \$100 or Less by Category (List Payments to Campaign Workers in Section B Below)			4. Amount Paid or Incurred This Period
3. Category of Expenditure View Supplemental Form(s)			
5. Subtotal: Non-Itemized Expenditures This Page (Sum Column 4)			\$ 0.00
6. Subtotal: Non-Itemized Expenditures Any Attached Pages			+ 206.60
7. Total: Non-Itemized Expenditures This Period (Sum 5 + 6)			\$ 206.60
B. Itemized Expenditures All Over \$100 And All Payments To Campaign Workers		9. Date	10. Purpose - (If Payment was to a Campaign Worker, Show Aggregate Paid)
8. Name and Address of Recipient			11. Amount This Period
Name:			\$
Address:			<input type="checkbox"/> Paid
City / State:			<input type="checkbox"/> Incurred
Name:			\$
Address:			<input type="checkbox"/> Paid
City / State:			<input type="checkbox"/> Incurred
Name:			\$
Address:			<input type="checkbox"/> Paid
City / State:			<input type="checkbox"/> Incurred
12. Subtotal: This Page (Sum Column 11)			\$ 0.00
13. Subtotal: Any Attached Pages			+ 11,696.57
14. Total: Itemized Expenditures This Period (Sum 12 + 13)			\$ 11,696.57
15. Total: Monetary Expenditures This Period (Sum 7 + 14)			\$ 11,903.17
16. Amount of Line 15 Above which was Paid Out This Period			\$ 11,903.17
17. Amount of Line 15 Which Were Expenditures Incurred This Period Including Payments Made by Credit Cards			\$ 0.00
18. If Committee Made Any In-Kind Expenditures This Period, List Amount			\$ 0.00
19. Funds Used For Paying Loans/Credit Cards This Period (Attach Form CD1B - amount goes to Line 5 / Part II)			\$ 0.00
C. Contributions Made (Regardless of Amount)		21. Date	22. Amount
20. Name and Address of Candidate or Committee			
Name:			\$
Address:			<input type="checkbox"/> Monetary
City / State:			<input type="checkbox"/> In-Kind
Name:			\$
Address:			<input type="checkbox"/> Monetary
City / State:			<input type="checkbox"/> In-Kind
Name:			\$
Address:			<input type="checkbox"/> Monetary
City / State:			<input type="checkbox"/> In-Kind
23. Subtotal: This Page (Sum Column 22)			\$ 0.00
24. Subtotal: Any Attached Pages			\$ 0.00
25. Total: Monetary Contributions Made This Period		A. By Cash / Check	\$ 0.00
		B. By Credit Card	\$ 0.00
26. If Committee Made Any Loans This Period, List Amount			\$
27. Total: All Monetary Contributions and Loans Made This Period (Sum 25 + 26)			\$ 0.00
28. Total: In-Kind Contributions Made This Period, List Amount			\$ 0.00



NAME OF COMMITTEE
Friends Of Chris Kelly

DATE
3/25/2019

(LIST PAYMENTS TO CAMPAIGN WORKERS IN SECTION B ON FORM CD3 OR USE FORM CD3 SUP B)

AMOUNT PAID OR
INCURRED THIS PERIOD

CATEGORY OF EXPENDITURE	2019-20	2020-21	2021-22
1. Salaries and allowances	100.00	100.00	100.00
2. Pension and gratuity	10.00	10.00	10.00
3. Medical	5.00	5.00	5.00
4. Fuel and transport	5.00	5.00	5.00
5. Telephone	5.00	5.00	5.00
6. Office expenses	5.00	5.00	5.00
7. Printing and stationery	5.00	5.00	5.00
8. Repairs and maintenance	5.00	5.00	5.00
9. Travelling	5.00	5.00	5.00
10. Miscellaneous	5.00	5.00	5.00
11. Capital expenditure	5.00	5.00	5.00
12. Other	5.00	5.00	5.00
Total	140.00	140.00	140.00

Printing

\$	89.08
----	-------

Data CD

\$	15.00
----	-------

Fees

\$	11.35
----	-------

Copies

\$	21.06
----	-------

Sign materials

\$	59.39
----	-------

Office supplies

\$	10.72
----	-------

\$

\$

\$

\$

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\$

TOTAL: ITEMIZED EXPENDITURES THIS PAGE

(CARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)

\$

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MISSOURI ETHICS COMMISSION
ITEMIZED EXPENDITURES OVER \$100 SUPPLEMENTAL FORM

OFFICE USE ONLY


NAME OF COMMITTEE Friends Of Chris Kelly		REPORT DATE 3/25/2019	
ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS			
NAME AND ADDRESS OF RECIPIENT	DATE	PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)	AMOUNT THIS PERIOD
NAME: Columbia Tribune ADDRESS: 101 N Fourth St CITY/STATE: Columbia MO 65201	2/20/2019	Advertising \$	\$ 572.50 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: PPP LLC ADDRESS: 4001 Coats Ln CITY/STATE: Columbia MO 65203	2/26/2019	List mgmt & analysis \$	\$ 1,000.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Pixel Foundry ADDRESS: 1415 Killarney Dr CITY/STATE: Columbia MO 65203	2/27/2019	Media management \$	\$ 500.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: NAACP Freedom Fund ADDRESS: 211 Park DeVille Dr CITY/STATE: Columbia MO 65203	3/6/2019	Advertising/tickets \$	\$ 300.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: FastSigns ADDRESS: 1001 Fay St CITY/STATE: Columbia MO 65201	3/6/2019	Signs \$	\$ 1,287.06 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Columbia Mkting Group ADDRESS: 2001 Corporate Pl CITY/STATE: Columbia MO 65202	3/12/2019	Digital media \$	\$ 950.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Columbia Mkting Group ADDRESS: 2001 Corporate Pl CITY/STATE: Columbia MO 65202	3/12/2019	Digital media/website \$	\$ 2,200.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Columbia Daily Tribune ADDRESS: PO Box 798 CITY/STATE: Columbia MO 65205	3/13/2019	Advertising \$	\$ 572.50 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Hotcards ADDRESS: 2400 Superior Ave East CITY/STATE: Cleveland OH 44114	3/14/2019	Printing \$	\$ 612.24 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Ali Price ADDRESS: 111 E Brandon Rd CITY/STATE: Columbia MO 65203	3/17/2019	Reim for banner \$	\$ 130.66 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Hotcards ADDRESS: 2400 Superior Ave East CITY/STATE: Cleveland OH 44114	3/17/2019	Printing \$	\$ 1,039.76 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Moonshadow Studio ADDRESS: 2310 Bluff Blvd CITY/STATE: Columbia MO 65201	3/21/2019	Digital media \$	\$ 250.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: PayPal ADDRESS: 2211 N First St CITY/STATE: San Jose CA 95131	3/21/2019	Online contribution fees \$	\$ 436.86 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: FaceBook ADDRESS: 1 Hacker Way CITY/STATE: Menlo Park CA 94025	3/21/2019	Online advertising \$	\$ 844.99 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: PPP LLC ADDRESS: 4001 Coats Ln CITY/STATE: Columbia MO 65203	3/21/2019	List management & analysis \$	\$ 1,000.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
TOTAL: ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS (CARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)			\$ --



MISSOURI ETHICS COMMISSION
INDEPENDENT CONTRACTOR EXPENDITURE

OFFICE USE ONLY

INSTRUCTIONS ON REVERSE SIDE

NAME OF COMMITTEE Friends Of Chris Kelly		DATE 3/25/2019		
ITEMIZED EXPENDITURES ON PAYMENT TO INDEPENDENT CONTRACTOR (NAME AND ADDRESS OF RECIPIENT)	DATE	DESCRIPTION OF SERVICES RENDERED	PRO-RATED COST FOR SERVICE	TOTAL AMOUNT PAID
PPP LLC 4001 Coats Ln Columbia MO 65203	2/26/2019	List management & analysis	1,000.00	1,000.00
PPP LLC 4001 Coats Ln Columbia MO 65203	3/21/2019	List management & analysis	1,000.00	1,000.00
TOTAL ALL PAGES 				2,000.00